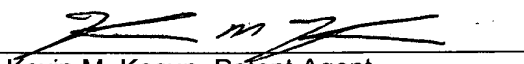
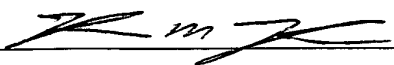
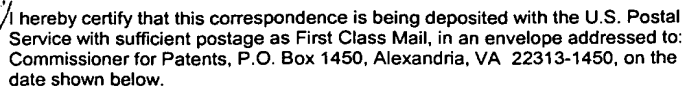




IFW

AMENDMENT TRANSMITTAL LETTER				Docket No. SPINE 3.0-455 CONT IV	
Application No. 10/776,651		Filing Date February 11, 2004		Examiner C. L. Miller	
				Art Unit 3738	
Applicant(s): Rafail Zubok, Antonio Valdevit, Michael W. Dudasik, and Joseph P. Errico					
Invention: CERVICAL DISC REPLACEMENT					
TO THE COMMISSIONER FOR PATENTS					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	20	- 20 =		x	
Independent Claims	1	- 3 =		x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>12-1095</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Kevin M. Kocun, Patent Agent Attorney Reg. No.: 54,230				Dated: <u>August 19, 2005</u>	
LERNER, DAVID, LITTENBERG, KRUMHOLZ & MENTLIK, LLP 600 South Avenue West Westfield, New Jersey 07090 (908) 518-6383					
I hereby certify that this correspondence is being deposited with the U.S. Postal Service with sufficient postage as First Class Mail, in an envelope addressed to: MS Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.					
Dated: August 19, 2005		Signature:  (Kevin M. Kocun, Patent Agent)			



Signature:

(Kevin M. Kocun, Patent Agent)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

For: CERVICAL DISC REPLACEMENT

: Examiner: C. L. Miller

AMENDMENT

In response to the official action mailed May 19, 2005, Applicants submit the following amendments and remarks.